

Maintenance Request for LANL Housing Apartments

(Form may be returned by email if you have electronic signature capability, otherwise please print, sign and fax to Housing Office at 665-6701)

DATE: _____

ADDRESS OF APARTMENT: _____

NAME OF REQUESTER: _____

DAYTIME PHONE NUMBER: _____

EMAIL ADDRESS: _____

DESCRIPTION OF THE
MAINTENANCE REQUEST –

Please be detailed in your
description.

SIGNATURE _____

Housing office Use Only

Work Order Completed: **YES** ☐ **NO** ☐

Work Order #: _____

Completion Date: _____

Landlord Notified: **YES** ☐ **NO** ☐

Notification Date: _____

Housing Office Staff: _____